

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

BP AMOCO CHEMICAL COMPANY
c/o It's Registered Agent: The Corporation
Company
120 N. Robinson, Suite 735
Oklahoma City, OK 73120

Docv1034 Alias & C

**2. Article Number
(Transfer from service label)**

7003 3110 0004 0800 3682

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY**A. Signature**

X *[Signature]* Agent Addressee

B. Received by (Printed Name)**C. Date of Delivery****D. Is delivery address different from item 1? Yes**If YES, enter delivery address below: No**3. Service Type**

<input checked="" type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail
<input type="checkbox"/> Registered	<input checked="" type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.

4. Restricted Delivery? (Extra Fee) Yes